

Facsimile



Eli Lilly and Company
Lilly Corporate Center
Indianapolis, Indiana 46285
U.S.A.

Legal Department - Patent Division

Date: June 10, 2004

To: M. Audet
Company: USPTO
Fax: 1-703-872-9306
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From: Thomas Webster
Fax: 317-276-5172
Phone: 317-276-3334
Total Pages: 10

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JUN 10 2004

Subject: Method for Reducing the Risk of Cancer
Serial No.: 10/070,598
Docket No.: X-13527

OFFICIAL

PRIVILEGED AND CONFIDENTIAL COMMUNICATION

Message: Please see attached.

If there are any transmittal problems please call Kim Bures at (317) 277-1469.

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Answers That Matter.

Please type a plus sign (+) inside this box → ☐

PTO/SB/17 (12/97)

Approved for use through 09/30/00. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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FEE TRANSMITTAL		Complete if Known																																																																																																																																																																																																																																																																																																											
<p>Note: Effective November 10, 1997. Patent fees are subject to annual revision.</p> <p>TOTAL AMOUNT OF PAYMENT (\$950.00)</p> <p>METHOD OF PAYMENT (check one)</p> <p>1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to: Deposit Account Number: <u>05-0840</u> Deposit Account Name: <u>Eli Lilly and Company</u></p> <p><input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance</p> <p>2. <input type="checkbox"/> Payment Enclosed: <input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other</p>		<p>Application Number 10/070,598 Filing Date July 23, 2002 First Named Inventor Janet M. Hock Group Art Unit 1654 Examiner Name M. Audet Attorney Docket Number X-13527</p>																																																																																																																																																																																																																																																																																																											
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CLAIMS</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Total Claims</th> <th>Extr a</th> <th>Fee from below</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr> <td>-20**=</td> <td><input type="checkbox"/></td> <td>X 18</td> <td></td> </tr> <tr> <td>-3**=</td> <td><input type="checkbox"/></td> <td>X 86</td> <td></td> </tr> <tr> <td>Multiple Dependent Claims (first time)</td> <td><input type="checkbox"/></td> <td>X 290</td> <td></td> </tr> </tbody> </table> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Fee Code</th> <th>Entity Fee (\$)</th> <th>Small Fee Code</th> <th>Entity Fee (\$)</th> <th>Fee Description</th> <th>Fee Paid</th> </tr> </thead> <tbody> <tr><td>103</td><td>18</td><td>203</td><td>9</td><td>Claims in excess of 20</td><td></td></tr> <tr><td>102</td><td>86</td><td>202</td><td>43</td><td>Independent claims in excess of 3</td><td></td></tr> <tr><td>104</td><td>290</td><td>204</td><td>145</td><td>Multiple dependent claim</td><td></td></tr> <tr><td>109</td><td>86</td><td>209</td><td>43</td><td>Reissue independent claims over original patent</td><td></td></tr> <tr><td>110</td><td>18</td><td>210</td><td>9</td><td>Reissue claims in excess of 20 and over original patent</td><td></td></tr> <tr><td colspan="5">SUBTOTAL (2)</td><td>(\$)0.00</td></tr> </tbody> </table> <p>**or number previously paid, if greater; For Reissues, see ABOVE</p>		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	101	770	201	385	Utility filing fee		106	340	206	170	Design filing fee		107	530	207	265	Plant filing fee		108	770	208	385	Reissue filing fee		114	160	214	80	Provisional filing fee		SUBTOTAL (1)					(\$)0.00	Total Claims	Extr a	Fee from below	Fee Paid	-20**=	<input type="checkbox"/>	X 18		-3**=	<input type="checkbox"/>	X 86		Multiple Dependent Claims (first time)	<input type="checkbox"/>	X 290		Large Fee Code	Entity Fee (\$)	Small Fee Code	Entity Fee (\$)	Fee Description	Fee Paid	103	18	203	9	Claims in excess of 20		102	86	202	43	Independent claims in excess of 3		104	290	204	145	Multiple dependent claim		109	86	209	43	Reissue independent claims over original patent		110	18	210	9	Reissue claims in excess of 20 and over original patent		SUBTOTAL (2)					(\$)0.00	<p>3. 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<p>SUBMITTED BY</p> <p>Typed or Printed Name: <u>Thomas D. Webster</u></p> <p>Signature: <u>Thomas D. Webster</u></p>		<p>Complete (if applicable)</p> <p>Reg. Number: <u>39,872</u></p> <p>Date: <u>6/10/04</u></p>																																																																																																																																																																																																																																																																																																											
<p>CERTIFICATION OF FACSIMILE TRANSMISSION</p> <p>I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.</p> <p style="text-align: center;"><u>Kimberley K. Bures</u> Type or print name of person signing certification</p> <p style="text-align: center;"><u>Kimberley K. Bures</u> <u>June 10, 2004</u> Signature Date</p>																																																																																																																																																																																																																																																																																																													

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CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to the Patent and Trademark Office on the date shown below.

Kimberley K. Bures

Type or print name of person signing certification

Kimberley K. Bures
SignatureJune 10, 2004
Date**PATENT APPLICATION**
IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant	:	Janet M. Hock)	
Serial No.	:	10/070,598)	
Filed	:	July 23, 2002)	Group Art Unit:
)	1654
For	:	Method for Reducing the Risk of Cancer)	Examiner:
)	M. Audet
Docket No.	:	X-13527)	

REPLY UNDER 37 C.F.R. 111 & AMENDMENT UNDER 37 C.F.R. 1.121Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Introductory Comments

In response to the Office Action dated January 5, 2004, please amend this application as follows:

Amendments to the Claims are reflected in the listing of claims, which begin on page 2 of this paper.

Remarks/Arguments begin on page 3 of this paper.